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First Named Inventor (or Application Identifier):						200	
Thomas N. Berarducci, et al							
Enclosed are:							
1. X Specification					signment of the invention to		
2. 8 Sheets of drawings					stman Kodak Company rtified copy of a priority		
3. X Information Disclosure Statement Under 37 CFR 1.97.				8. do	8. document. Associate Power of Attorney		
4. Combined Declaration for Patent Application and Power of Attorney:  4a. X New							
4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)							
40. Copy from a prior application (57 CFR 1.05(d) (for continuation divisional with box 11 completed)							
5. Incorporation by R	teferenc	e (useable if	Box 4b is	9. De	eletion of Inventor(s).		
checked) The entire disclosure of the prior application, from				Signed stateme	Signed statement attached deleting inventor(s) named		
which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2							
is considered as being part of the disclosure of the accompanying 1.33(b).							
application and is hereby incorporated by reference therein.							
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,							
after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION							
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,							
filed, entitled.							
If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information:							
11. Continuation Divisional Continuation-in-part (CIP) of prior application No:							
12. X Please address all written communications to Thomas H. Close, Patent Legal Staff,							
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.							
Please Direct all telephone calls to Raymond L. Owens at (716) 477-4653.							
The filing fee has been calculat	ted as sh	own below:				•	
FOR:		. FILED	NO. EXTRA	RATE	FEE		
BASIC FEE					\$710		
TOTAL CLAIMS	11	- 20 =	0	x 18 =	\$0		
INDEPENDENT CLAIMS	2	- 3 =	0	x 80 =	\$0		
MULTIPLE DEPENDENT CLAIM PRESENTED				+ 270	\$0		
				TOTAL	\$710		
X Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of \$710.							
A duplicate copy of this sheet is enclosed							
The Commissioner is hereby authorized to charge any additional filing fees required under							
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.							
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Raymond L. Owens/jmv Telephone (716) 477-4653 Facsimile (716) 477-4646

Attorney for Applicants Registration No. 22,363